510(k) SUMMARY OF SAFETY AND EFFECTIVENESS

REGULATORY AUTHORITY

Safe Medical Devices Act of 1990, 21 CFR 807.92

COMPANY NAME/CONTACT

Heather MacFalls Reliant Technologies, Inc. 464 Ellis St. Mountain View, CA 94043 650 605-2257 650 605-2057 fax hmacfalls@fraxel.com

NAME OF DEVICE

Trade Name: Fraxel III SR Laser System (Fraxel re:pairTM) and

Accessories

Common Name: Laser Surgical Instrument

Regulation Number 878.4810

Product code: GEX

Device Panel: General Surgery/Restorative Devices

Device Classification: Class II

LEGALLY MARKETED PREDICATE DEVICES

Name: Fraxel SR Laser System and Accessories

510(k) #: K053047, K050841, K042319, K040617 and K031795

Name: Fraxel II SR Laser System and Accessories

510(k) #: K062303

Name: Fraxel III SR Laser System and Accessories

510(k) #: K063038

Name: Lumenis UltraPulse Encore Carbon Dioxide Surgical Laser and Delivery

Device Accessories

510(k) #: K022060, K030147

DEVICE DESCRIPTION

The Fraxel III SR Laser System consists of a laser source which delivers a pattern of thermal energy to the epidermis and dermis using scanning and focusing optics. Device accessories include interchangeable treatment tips.

INDICATION FOR USE STATEMENT

The Fraxel III SR (Fraxel re:pair M) Laser System is intended for use in:

Dermatological procedures requiring ablation (removal), resurfacing and coagulation of soft tissue.

Treatment of wrinkles, rhytides, furrows, fine lines, texture irregularities, pigmented lesions and vascular dyschromia.

SUBSTANTIAL EQUIVALENCE COMPARISON

Indications for Use

Substantial equivalence for the Fraxel III SR (Fraxel re:pair) Laser System and Accessories is supported by the predicate devices listed in this submission, which have identical or similar indication statements.

Clinical Performance Data

Non-Significant Risk and Investigational Device Exemption studies support the clinical performance of the Fraxel III SR (Fraxel re:pair) Laser System. Sufficient clinical data supported the determination of safety and effectiveness for the Fraxel III SR (Fraxel re:pair) Laser System and Accessories. The device performed as clinically intended with no new issues of safety and effectiveness introduced.

Technological Characteristics

Key technological characteristics of the Fraxel III SR (Fraxel re:pair) Laser System, such as energy type and operating principle, are equivalent to the Fraxel SR Laser System as described in submissions K053047, K050841, K042319, K040617 and K031795, to the Fraxel II SR Laser System as described in K062303 and to the Lumenis Ultrapulse Encore Laser System as described in K020660 and K030147.

CONCLUSION

Based on the design, materials, function, intended use and clinical evaluation, the Fraxel III (Fraxel re:pair) Laser System and Accessories is substantially equivalent to the devices currently marketed under the Federal Food, Drug and Cosmetic Act. Safety and effectiveness are reasonably assured, justifying 510(k) clearance.





Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

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Reliant Technologies, Inc.
% Ms. Heather MacFalls
Clinical and Regulatory Affairs
464 Ellis Street
Mountain View, California 94043

Re: K071051

Trade/Device Name: Fraxel III SR Laser System (Fraxel re:pair™) and Accessories

Regulation Number: 21 CFR 878.4810

Regulation Name: Laser surgical instrument for use in general and plastic surgery and in

dermatology

Regulatory Class: II Product Code: GEX Dated: August 1, 2007 Received: August 7, 2007

Dear Ms. MacFalls:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as setforth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the

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electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (240) 276-0120. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (240) 276-3150 or at its Internet address http://www.fda.gov/cdrh/industry/support/index.html.

Sincerely yours,

For Mark N. Melkerson III. 127

Director

Division of General, Restorative, and Neurological Devices Office of Device Evaluation Center for Devices and Radiological Health

Enclosure

Indications for Use

510(k) Number (if known):
Device Name: <u>Fraxel III SR Laser System (Fraxel re:pair™) and Accessories</u> Indications For Use:
"The Fraxel III SR Laser System and accessories is intended for use in:
Dermatological procedures requiring ablation (removal), resurfacing and coagulation of soft tissue. Treatment of wrinkles, rhytides, furrows, fine lines, textural irregularities, pigmented lesions and vascular dyschromia."
Prescription Use X AND/OR Over-The-Counter Use (Part 21 CFR 801 Subpart D) (21 CFR 807 Subpart C) (PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)
Concurrence of CDRH, Office of Device Evaluation (ODE) (Division Sign-Off) Division of General, Restorative, and Neurological Devices 510(k) Number (0.7105)